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Image# 201609019023770688

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X Fo	r Other Than	An Authorized	Committe	ee			
1 NAME OF T	YPE OR PRINT ▼	- Fva	manla. If tuni			Office Use Only	
1. NAME OF TY COMMITTEE (in full)	TPE OR PRINT ¥		mple: If typion of the lines.	ng, type	12FE4M5		
PROTECTIVE LIFE CO	RPORATION	FEDERAL	PAC				
ADDRESS (number and street)	P.O. BOX 2606						
Check if different than previously reported. (ACC)	BIRMINGHAM				AL	35202	-
2. FEC IDENTIFICATION NUM	IBER ▼	CITY ▲		;	STATE 🛦	ZIP CO	DE 🛦
C C00161414		3. IS THIS REPORT		NEW (N) OR	AM (A)	IENDED	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	PRE-Ele Report fo	Election on	Ğ.	12C)	x Sep	in the State o	Special (30S)
5. Covering Period 08	/ D D / Y	2016	through	M M M	31	2016	
certify that I have examined this	·	•	wledge and	belief it is tru	ie, correct and	l complete.	
Type or Print Name of Treasurer	STEVEN WALKER	X .					
Signature of Treasurer STEVER	N WALKER		[Electronicall	y Filed]	oate 09	01	2016
NOTE: Submission of false, erroneo	us, or incomplete in	nformation may su	ubject the per	son signing th	nis Report to th	ne penalties of 2 l	J.S.C. §437g.
Office Use Only						FEC FOR Rev. 12/2	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

PROTECTIVE LIFE CORPORATION FEDERAL PAC

80 01 2016 08 2016 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 125422.49 January 1, 2016 (b) Cash on Hand at 110834.01 Beginning of Reporting Period..... 4902.64 53314.16 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 178736.65 115736.65 6(a) and 6(c) for Column B)..... 2500.00 65500.00 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 113236.65 113236.65 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

PROTECTIVE LIFE CORPORATION FEDERAL PAC

1. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 4785.22 45382 (ii) Uniternized (use Schedule A)	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Than Political Committees (i) Iterrized (use Schedule A)	1. Contributions (other than loans) From:		
(i) Itemized (use Schedule A)	(a) Individuals/Persons Other		
(ii) Uniternized	Than Political Committees		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	(i) Itemized (use Schedule A)	4785.22	45382.48
Lines 11(a)(i) and (ii)	. /	117.42	7931.68
(c) Other Political Committees		4902.64	53314.16
(a) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	(b) Political Party Committees	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)		0.00	0.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)		7 7	
Totals to Line 33, page 5)			
1. Transfers From Affiliated/Other Party Committees		4902.64	53314.16
Party Committees			
3. All Loans Received		0.00	0.00
Loan Repayments Received	rany commission	7	
Coffsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	B. All Loans Received	0.00	0.00
Coffsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)			
5. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 6. Refunds of Contributions Made to Federal Candidates and Other Political Committees	4. Loan Repayments Received	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)			
(Carry Totals to Line 37, page 5)			
S. Refunds of Contributions Made to Federal Candidates and Other Political Committees	The state of the s	0.00	0.00
Political Committees		7	7
7. Other Federal Receipts (Dividends, Interest, etc.)	to Federal Candidates and Other		
(Dividends, Interest, etc.)	Political Committees	0.00	0.00
3. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)	7. Other Federal Receipts		
(a) Non-Federal Account (from Schedule H3)	(Dividends, Interest, etc.)	0.00	0.00
(from Schedule H3)	3. Transfers from Non-Federal and Levin Funds		
(b) Levin Funds (from Schedule H5)	(a) Non-Federal Account		
(c) Total Transfers (add 18(a) and 18(b)) 7. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 4902.64 53314.	(from Schedule H3)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b)) Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 4902.64 53314.			
0. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶ 4902.64 53314.	(b) Levin Funds (from Schedule H5)	0.00	0.00
0. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶ 4902.64 53314.	=		
12, 13, 14, 15, 16, 17, and 18(c))	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
20. Total receipts	9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶		53314.
(subtract Line 18(c) from Line 19) ► 4902.64 53314.	·	4902 64	53314.16

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
22. Transfers to Affiliated/Other Party		
Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	2500.00	65500.00
4. Independent Expenditures	0.00	0.00
(use Schedule E)25. Coordinated Party Expenditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	0.00
29. Other Disbursements	0.00	0.00
 Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity (from Schedule H6))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
1. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2500.00	65500.00
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)▶	2500.00	65500.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	· · · · · · · · · · · · · · · · · · ·				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	4902.64	53314.16			
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00			
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4902.64	53314.16			
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00			
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00			
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00			

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		6	OF	36	
(0	(check only one)									
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<u> </u>		Tiarre and address of any political committee to	Contraction from odon committee.
	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
	Full Name (Last, First, Middle Initial) MALCOLM BARTLETT Mailing Address 3155 PINE RIDGE ROAD City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code AL 35213 C Occupation VP CORPORATE ACCOUNTING Aggregate Year-to-Date ▼ 800.00	Date of Receipt 08 15 2016 Transaction ID: B002857S000001L11A1 Amount of Each Receipt this Period 50.00 Memo Item PAYROLL DEDUCTION
	Full Name (Last, First, Middle Initial) MALCOLM BARTLETT Mailing Address 3155 PINE RIDGE ROAD City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify) Other (specify)	State Zip Code AL 35213 C Occupation VP CORPORATE ACCOUNTING Aggregate Year-to-Date ▼ 800.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Full Name (Last, First, Middle Initial) LANCE BLACK Mailing Address 1817 SURREY OAKS LANE City VESTAVIA FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35243 C Occupation SVP, TREASURER Aggregate Year-to-Date ▼ 400.00	Date of Receipt 08
s	SUBTOTAL of Receipts This Page (optional)	<u> </u>	125.00
T	OTAL This Period (last page this line number of	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

l	FOR LINE NUMBER:					PAGE		7	OF	36	
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UI	tor commercial purposes, other than using the	name and address of any political committee to	Solicit contributions from Such confiffittee.
\rangle	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
	Full Name (Last, First, Middle Initial) LANCE BLACK Mailing Address 1817 SURREY OAKS LANE City VESTAVIA FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35243 C Occupation SVP, TREASURER Aggregate Year-to-Date ▼	Date of Receipt 08 31 2016 Transaction ID: B002860S000002L11A1 Amount of Each Receipt this Period 25.00 Memo Item PAYROLL DEDUCTION
	Full Name (Last, First, Middle Initial) EDNA BOATRIGHT Mailing Address 3408 TAL HEIM CIRCLE City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code AL 35216 C Occupation VP CUSTOMER RELATIONSHIP MKTG Aggregate Year-to-Date ▼ 800.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Full Name (Last, First, Middle Initial) EDNA BOATRIGHT Mailing Address 3408 TAL HEIM CIRCLE City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code AL 35216 C Occupation VP CUSTOMER RELATIONSHIP MKTG Aggregate Year-to-Date ▼ 800.00	Date of Receipt 08 31 2016 Transaction ID: B002860S000003L11A1 Amount of Each Receipt this Period 50.00 Memo Item PAYROLL DEDUCTION
s	UBTOTAL of Receipts This Page (optional)	>	125.00
Т	OTAL This Period (last page this line number of	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		8	OF	36	
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UI	for commercial purposes, other than using the	mame and address of any political committee to	Solicit contributions from Such committee.
\rangle	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
	Full Name (Last, First, Middle Initial) STEVE CALLAWAY Mailing Address 2900 REDMONT PARK CIRCL City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify) Other (specify)	E, #501W State Zip Code AL 35205 C Occupation SENIOR ASSOCIATE COUNSEL, SVP Aggregate Year-to-Date ▼ 1541.92	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Full Name (Last, First, Middle Initial) STEVE CALLAWAY Mailing Address 2900 REDMONT PARK CIRCL City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	E, #501W State Zip Code AL 35205 C Occupation SENIOR ASSOCIATE COUNSEL, SVP Aggregate Year-to-Date ▼ 1541.92	Date of Receipt M
	Full Name (Last, First, Middle Initial) GREGG CARIOLANO Mailing Address 5200 AUTUMNWINDS DR. City ST. LOUIS FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MO 63129 C Occupation VP, FINANCIAL OFFICE APD Aggregate Year-to-Date ▼ 560.00	Date of Receipt 08 15 2016 Transaction ID: B002857S000006L11A1 Amount of Each Receipt this Period 35.00 Memo Item PAYROLL DEDUCTION
s	UBTOTAL of Receipts This Page (optional)	<u> </u>	229.24
T	OTAL This Period (last page this line number o	nly)	

Use separate schedule(s) for each category of the Detailed Summary Page

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<u> </u>	Tor commercial purposes, other than using the	manie and address of any political committee to	Const. Contributions from Such Sommittee.		
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC			
Α.	Full Name (Last, First, Middle Initial) GREGG CARIOLANO Mailing Address 5200 AUTUMNWINDS DR. City ST. LOUIS	Date of Receipt M			
	FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	MO 63129 C Occupation VP, FINANCIAL OFFICE APD Aggregate Year-to-Date ▼ 560.00	Amount of Each Receipt this Period 35.00 Memo Item PAYROLL DEDUCTION		
	Full Name (Last, First, Middle Initial) VINCENT CIRULLI Mailing Address 2350 MONTEVALLO ROAD, A City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35223 C Occupation SVP DERIVATIVE VA HEDGING Aggregate Year-to-Date ▼	Date of Receipt 08 15 2016 Transaction ID: B002857S000007L11A1 Amount of Each Receipt this Period 15.00 Memo Item PAYROLL DEDUCTION		
C.	Full Name (Last, First, Middle Initial) VINCENT CIRULLI Mailing Address 2350 MONTEVALLO ROAD, A City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify) Other (specify)		Date of Receipt 08 31 2016 Transaction ID: B002860S000007L11A1 Amount of Each Receipt this Period 15.00 Memo Item PAYROLL DEDUCTION		
Н	UBTOTAL of Receipts This Page (optional)		65.00		
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
۹.	Full Name (Last, First, Middle Initial) PATRICIA COBB Mailing Address 4206 PAXTON PLACE City	State Zip Code	Date of Receipt M
	VESTAVIA FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	AL 35242 C Occupation 2VP, CASH MANAGEMENT Aggregate Year-to-Date ▼ 400.00	Amount of Each Receipt this Period 25.00 Memo Item PAYROLL DEDUCTION
	Full Name (Last, First, Middle Initial) PATRICIA COBB Mailing Address 4206 PAXTON PLACE City VESTAVIA FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify) Other (specify)	State Zip Code AL 35242 C Occupation 2VP, CASH MANAGEMENT Aggregate Year-to-Date ▼ 400.00	Date of Receipt 08 31 2016 Transaction ID: B002860S000008L11A1 Amount of Each Receipt this Period 25.00 Memo Item PAYROLL DEDUCTION
	Full Name (Last, First, Middle Initial) KATE COTTON Mailing Address 3412 SPRINGHILL ROAD City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35223 C Occupation VP COMMUNITY RELATIONS Aggregate Year-to-Date ▼ 1200.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)	>	125.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other	than using the name and address of any political committee	to solicit contributions from such committee.
/	CORPORATION FEDERAL PAC	
Full Name (Last, First, Middle I KATE COTTON Mailing Address 3412 SPRING	HILL ROAD	Date of Receipt 08 31 2016
City BIRMINGHAM	State Zip Code AL 35223	Transaction ID: B002860S000009L11A1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATE Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1200.00	Memo Item PAYROLL DEDUCTION
Full Name (Last, First, Middle I MARK CYPHERT Mailing Address 200 HALLMAN City	,	Date of Receipt M
HOMEWOOD	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATE Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 320.00	20.00 Memo Item PAYROLL DEDUCTION
Full Name (Last, First, Middle I MARK CYPHERT Mailing Address 200 HALLMAN	,	Date of Receipt 08 31 2016
City HOMEWOOD	State Zip Code AL 35209	Transaction ID : B002860S000010L11A1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer PROTECTIVE LIFE CORPORA' Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	PAYROLL DEDUCTION
SUBTOTAL of Receipts This Page	ge (optional)	115.00
TOTAL This Period (last page thi	s line number only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using tr	le name and address of any political committee to	o solicit contributions from such confiffittee.
NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPOR	ATION FEDERAL PAC	
Full Name (Last, First, Middle Initial) ANTHONY GREEN Mailing Address 4114 TERNVIEW ROAD City VESTAVIA FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary Other (specify)	State Zip Code AL 35242 C Occupation VP & ACTUARY, ERM Aggregate Year-to-Date ▼ 480.00	Date of Receipt M
Full Name (Last, First, Middle Initial) ANTHONY GREEN Mailing Address 4114 TERNVIEW ROAD City VESTAVIA FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35242 C Occupation VP & ACTUARY, ERM Aggregate Year-to-Date ▼ 480.00	Date of Receipt 08 31 2016 Transaction ID: B002860S000012L11A1 Amount of Each Receipt this Period 30.00 Memo Item PAYROLL DEDUCTION
Full Name (Last, First, Middle Initial) WADE HARRISON Mailing Address 2 ABBEY LANE City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary Other (specify)	State Zip Code AL 35226 C Occupation SVP, CHIEF PRODUCT ACTUARY Aggregate Year-to-Date ▼ 340.00	Date of Receipt 08 15 2016 Transaction ID: B002857S000014L11A1 Amount of Each Receipt this Period 21.25 Memo Item PAYROLL DEDUCTION
SUBTOTAL of Receipts This Page (optional)	>	81.25
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Use separate schedule(s) for each category of the Detailed Summary Page

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01 101 1	commercial pulposes, other than using the	name and address of any political committee to	Solicit contributions from Such committee.
	ME OF COMMITTEE (In Full) ROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
City BIF FEC fede Nan	I Name (Last, First, Middle Initial) ADE HARRISON Illing Address 2 ABBEY LANE RMINGHAM C ID number of contributing eral political committee. The of Employer OTECTIVE LIFE INSURANCE COMPANY ceipt For: Primary Other (specify) Other (specify)	State Zip Code AL 35226 C Occupation SVP, CHIEF PRODUCT ACTUARY Aggregate Year-to-Date ▼ 340.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
BIR FEC fede Nan	I Name (Last, First, Middle Initial) RUCE HEEN Illing Address 4004 MILNER WAY RMINGHAM C ID number of contributing eral political committee. The of Employer OTECTIVE LIFE INSURANCE COMPANY Ceipt For: Primary General Other (specify)	State Zip Code AL 35242 C Occupation VP DIVISION CONTROLLER Aggregate Year-to-Date ▼ 400.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City FEC fede Nan	Name (Last, First, Middle Initial) RUCE HEEN illing Address 4004 MILNER WAY RMINGHAM C ID number of contributing eral political committee. me of Employer OTECTIVE LIFE INSURANCE COMPANY ceipt For: Primary Other (specify)	State Zip Code AL 35242 C Occupation VP DIVISION CONTROLLER Aggregate Year-to-Date ▼ 400.00	Date of Receipt M M M 2016 Transaction ID: B002860S000015L11A1 Amount of Each Receipt this Period 25.00 Memo Item PAYROLL DEDUCTION
SUBT	FOTAL of Receipts This Page (optional)	<u> </u>	71.25
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Use separate schedule(s) for each category of the Detailed Summary Page

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	13		14		15		16		17

<u> </u>	Tor commercial purposes, other than using the	name and address of any political committee to	Control Contributions from Guon Continuition.
	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
	Full Name (Last, First, Middle Initial) DERRY HERRING Mailing Address 6123 EAGLE POINT CIRCLE City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify) Other (specify)	State Zip Code AL 35242 C Occupation SVP, CHIEF AUDITOR Aggregate Year-to-Date ▼	Date of Receipt M M CONTROL DE DE CONTROL DE DECENION Date of Receipt 153.12 Memo Item PAYROLL DEDUCTION
	Full Name (Last, First, Middle Initial) DERRY HERRING Mailing Address 6123 EAGLE POINT CIRCLE City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35242 C Occupation SVP, CHIEF AUDITOR Aggregate Year-to-Date ▼ 2429.92	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Full Name (Last, First, Middle Initial) CHARLOTTE JONES Mailing Address 6005 LAKESIDE DRIVE City MT OLIVE FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code AL 35117 C Occupation 2VP INFORMATION SERVICES Aggregate Year-to-Date ▼ 336.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)	<u> </u>	327.24
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or 1	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
۹.	Full Name (Last, First, Middle Initial) CHARLOTTE JONES Mailing Address 6005 LAKESIDE DRIVE City MT OLIVE FEC ID number of contributing federal political committee.	State Zip Code AL 35117	Date of Receipt 08 31 2016 Transaction ID: B002860S000018L11A1 Amount of Each Receipt this Period 21.00
	Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify) Other (specify)	Occupation 2VP INFORMATION SERVICES Aggregate Year-to-Date ▼ 336.00	Memo Item PAYROLL DEDUCTION
3	Full Name (Last, First, Middle Initial) MARSHALL KARCHUNAS Mailing Address 14814 BROOKHAVEN PLACE City CHESTERFIELD FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code MO 63017 C Occupation SENIOR VICE PRESIDENT Aggregate Year-to-Date ▼ 1191.68	Date of Receipt 08 15 2016 Transaction ID: B002857S000019L11A1 Amount of Each Receipt this Period 75.00 Memo Item PAYROLL DEDUCTION
5	Full Name (Last, First, Middle Initial) MARSHALL KARCHUNAS Mailing Address 14814 BROOKHAVEN PLACE City CHESTERFIELD FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify) ▼	State Zip Code MO 63017 C Occupation SENIOR VICE PRESIDENT Aggregate Year-to-Date ▼ 1191.68	Date of Receipt M M M J D D J 2016 Transaction ID: B002860S000019L11A1 Amount of Each Receipt this Period 75.00 Memo Item PAYROLL DEDUCTION
SI	JBTOTAL of Receipts This Page (optional)		171.00
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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORATION FEDERAL PAC Full Name (Last, First, Middle Initial) MATTHEW KOHLER Date of Receipt Mailing Address 2840 OVERTON ROAD 2016 15 City Zip Code State Transaction ID: B002857S000020L11A1 **BIRMINGHAM** AL 35223 Amount of Each Receipt this Period FEC ID number of contributing 51.00 federal political committee. Memo Item Name of Employer Occupation PAYROLL DEDUCTION PROTECTIVE LIFE CORPORATION SVP CHIEF TECHNOLOGY OFFICER Receipt For: Aggregate Year-to-Date ▼ Primary General 816.00 Other (specify) Full Name (Last, First, Middle Initial) **B. MATTHEW KOHLER** Date of Receipt Mailing Address 2840 OVERTON ROAD 08 31 2016 City State Zip Code Transaction ID: B002860S000020L11A1 **BIRMINGHAM** AL 35223 Amount of Each Receipt this Period FEC ID number of contributing 51.00 federal political committee. Memo Item Name of Employer Occupation PROTECTIVE LIFE CORPORATION PAYROLL DEDUCTION SVP CHIEF TECHNOLOGY OFFICER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 816.00 Full Name (Last, First, Middle Initial) c. MICHAEL KORTHAUS Date of Receipt Mailing Address 889 MIAMI RIDGE DRIVE 80 15 2016 City Zip Code State Transaction ID: B002857S000021L11A1 OH LOVELAND 45140 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer Occupation PAYROLL DEDUCTION PROTECTIVE LIFE INSURANCE COMPANY VP NATIONAL ACCOUNTS Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) 132.00

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SCHEDULE A (FEC Form 3X)

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ITEMIZED RECEIPTS 12 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORATION FEDERAL PAC Full Name (Last, First, Middle Initial) MICHAEL KORTHAUS Date of Receipt Mailing Address 889 MIAMI RIDGE DRIVE 2016 31 City Zip Code State Transaction ID: B002860S000021L11A1 OH LOVELAND 45140 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer Occupation PAYROLL DEDUCTION PROTECTIVE LIFE INSURANCE COMPANY VP NATIONAL ACCOUNTS Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JESSICA KUBAT Date of Receipt Mailing Address 1207 31ST STREET SOUTH 08 15 2016 City State Zip Code Transaction ID: B002857S000022L11A1 **BIRMINGHAM** AL 35205 Amount of Each Receipt this Period FEC ID number of contributing 21.00 federal political committee. Memo Item Name of Employer Occupation PROTECTIVE LIFE CORPORATION PAYROLL DEDUCTION 2VP ASSOCIATE COUNSEL Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 336,00 Full Name (Last, First, Middle Initial) c. JESSICA KUBAT Date of Receipt

Mailing Address 1207 31ST STREET SOUTH 2016 80 31 City State Zip Code Transaction ID: B002860S000022L11A1 ΑL **BIRMINGHAM** 35205 Amount of Each Receipt this Period FEC ID number of contributing С 21.00 federal political committee. Memo Item Name of Employer Occupation PAYROLL DEDUCTION

2VP ASSOCIATE COUNSEL

Aggregate Year-to-Date ▼

336.00 Other (specify) 72.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Receipt For:

Primary

PROTECTIVE LIFE CORPORATION

General

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	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
۸.	Full Name (Last, First, Middle Initial) FRANK LASSITER Mailing Address 3317 FARING ROAD City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code AL 35223 C Occupation VP ACQUISITION AND CAPITAL MARKE Aggregate Year-to-Date ▼ 379.84	Date of Receipt 08 15 2016 Transaction ID: B002857S000023L11A1 Amount of Each Receipt this Period 23.74 Memo Item PAYROLL DEDUCTION
	Full Name (Last, First, Middle Initial) FRANK LASSITER Mailing Address 3317 FARING ROAD City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code AL 35223 C Occupation VP ACQUISITION AND CAPITAL MARKE Aggregate Year-to-Date ▼ 379.84	Date of Receipt M
C.	Full Name (Last, First, Middle Initial) DEBORAH LONG Mailing Address 3576 SHANDWICK PLACE City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35242 C Occupation EVP CHIEF LEGAL OFFICER Aggregate Year-to-Date ▼ 3360.00	Date of Receipt 08 15 2016 Transaction ID: B002857S000025L11A1 Amount of Each Receipt this Period 210.00 Memo Item PAYROLL DEDUCTION
S	UBTOTAL of Receipts This Page (optional)		257.48
Т	OTAL This Period (last page this line number o	nly)	

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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
۹.	Full Name (Last, First, Middle Initial) DEBORAH LONG Mailing Address 3576 SHANDWICK PLACE		Date of Receipt
-	City BIRMINGHAM	State Zip Code AL 35242	08 31 2016 Transaction ID: B002860S000025L11A1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General	Occupation EVP CHIEF LEGAL OFFICER Aggregate Year-to-Date ▼	210.00 Memo Item PAYROLL DEDUCTION
3.	Other (specify) ▼ Full Name (Last, First, Middle Initial) DAVID LOPER Mailing Address 1300 27TH PLACE SOUTH #32	3360.00	Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
-	City BIRMINGHAM FEC ID number of contributing federal political committee.	State Zip Code AL 35205	Transaction ID: B002857S000026L11A1 Amount of Each Receipt this Period 21.00 Memo Item
	Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation SR ASSOCIATE COUNSEL, SVP Aggregate Year-to-Date ▼ 336.00	PAYROLL DEDUCTION
С.	Full Name (Last, First, Middle Initial) DAVID LOPER Mailing Address 1300 27TH PLACE SOUTH #3 City BIRMINGHAM	2 State Zip Code AL 35205	Date of Receipt M
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 21.00
	Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	Occupation SR ASSOCIATE COUNSEL, SVP Aggregate Year-to-Date ▼ 336.00	Memo Item PAYROLL DEDUCTION
SI	JBTOTAL of Receipts This Page (optional)	•	252.00
TC	OTAL This Period (last page this line number o	nly)	

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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
	Full Name (Last, First, Middle Initial) WILLIAM MCMULLEN Mailing Address 2556 WHETSTONE ROAD City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify) Call Name (Last, First, Middle Initial)	State Zip Code AL 35243 C Occupation VP CORPORATE ACCOUNTING & BPI Aggregate Year-to-Date ▼ 441.28	Date of Receipt 08 15 2016 Transaction ID: B002857S000028L11A1 Amount of Each Receipt this Period 27.58 Memo Item PAYROLL DEDUCTION
	Full Name (Last, First, Middle Initial) WILLIAM MCMULLEN Mailing Address 2556 WHETSTONE ROAD City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code AL 35243 C Occupation VP CORPORATE ACCOUNTING & BPI Aggregate Year-to-Date ▼ 441.28	Date of Receipt 08 31 2016 Transaction ID: B002860S000028L11A1 Amount of Each Receipt this Period 27.58 Memo Item PAYROLL DEDUCTION
	Full Name (Last, First, Middle Initial) JENNEFER MEYER Mailing Address 105 GRAND COVE PLACE City MADISON FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify) Other (specify)	State Zip Code AL 35758 C Occupation VP COMMUNICATIONS & SOC ENGMNT Aggregate Year-to-Date ▼ 400.00	Date of Receipt 08 15 2016 Transaction ID: B002857S000030L11A1 Amount of Each Receipt this Period 25.00 Memo Item PAYROLL DEDUCTION
S	UBTOTAL of Receipts This Page (optional)	>	80.16
T	OTAL This Period (last page this line number o	nly)	

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	AME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORATION	TION FEDERAL PAC	
Ma Cit M FE fec Na	ull Name (Last, First, Middle Initial) JENNEFER MEYER ailing Address 105 GRAND COVE PLACE ity MADISON EC ID number of contributing deral political committee. ame of Employer ROTECTIVE LIFE INSURANCE COMPANY eccipt For: Primary General Other (specify) ▼	State Zip Code AL 35758 C Occupation VP COMMUNICATIONS & SOC ENGMNT Aggregate Year-to-Date ▼ 400.00	Date of Receipt 08 31 2016 Transaction ID: B002860S000030L11A1 Amount of Each Receipt this Period 25.00 Memo Item PAYROLL DEDUCTION
BI FE fee Na	ull Name (Last, First, Middle Initial) LORI OSWALD ailing Address 303 LE JEUNE WAY ity IRMINGHAM EC ID number of contributing deral political committee. ame of Employer ROTECTIVE LIFE INSURANCE COMPANY eceipt For: Primary General Other (specify) ▼	State Zip Code AL 35209 C Occupation VP CORPORATE ACCOUNTING Aggregate Year-to-Date ▼ 720.00	Date of Receipt 08 15 2016 Transaction ID: B002857S000031L11A1 Amount of Each Receipt this Period 45.00 Memo Item PAYROLL DEDUCTION
Cit B FE fee Na	ull Name (Last, First, Middle Initial) LORI OSWALD ailing Address 303 LE JEUNE WAY ity BIRMINGHAM EC ID number of contributing deral political committee. ame of Employer ROTECTIVE LIFE INSURANCE COMPANY eccipt For: Primary General Other (specify) ▼	State Zip Code AL 35209 C Occupation VP CORPORATE ACCOUNTING Aggregate Year-to-Date ▼ 720.00	Date of Receipt 08 31 2016 Transaction ID: B002860S000031L11A1 Amount of Each Receipt this Period 45.00 Memo Item PAYROLL DEDUCTION
SUB	BTOTAL of Receipts This Page (optional)	>	115.00
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
Δ.	Full Name (Last, First, Middle Initial) ARTHUR OWENS Mailing Address 104 LONGRIDGE DRIVE City ALEXANDRIA	State Zip Code KY 41001	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	Occupation ANNUITY DSD Aggregate Year-to-Date ▼ 404.96	25.31 Memo Item PAYROLL DEDUCTION
	Full Name (Last, First, Middle Initial) ARTHUR OWENS Mailing Address 104 LONGRIDGE DRIVE City ALEXANDRIA FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code KY 41001 C Occupation ANNUITY DSD Aggregate Year-to-Date ▼ 404.96	Date of Receipt M M M 2016 Transaction ID: B002860S000032L11A1 Amount of Each Receipt this Period 25.31 Memo Item PAYROLL DEDUCTION
C .	Full Name (Last, First, Middle Initial) PHILIP PASSAFIUME Mailing Address 1033 LAKE COLONY LANE City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35242 C Occupation SVP DIR FIXED INCOME Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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\rangle	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
Α.	Full Name (Last, First, Middle Initial) PHILIP PASSAFIUME Mailing Address 1033 LAKE COLONY LANE		Date of Receipt 08 31 2016
	City BIRMINGHAM	State Zip Code AL 35242	Transaction ID: B002860S000033L11A1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	18.75
	Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SVP DIR FIXED INCOME	Memo Item PAYROLL DEDUCTION
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
В.	Full Name (Last, First, Middle Initial) CHANDRASEKHAR PISUPATI Mailing Address 3093 BROOKHILL DRIVE		Date of Receipt
	City BIRMINGHAM	State Zip Code AL 35242	08 15 2016 Transaction ID : B002857S000034L11A1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	75.00
	Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SVP CREDIT AND MKT RISK	Memo Item PAYROLL DEDUCTION
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	
С.	Full Name (Last, First, Middle Initial) CHANDRASEKHAR PISUPATI		Date of Receipt
	Mailing Address 3093 BROOKHILL DRIVE		08 31 2016
	City BIRMINGHAM	State Zip Code AL 35242	Transaction ID: B002860S000034L11A1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	75.00
	Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SVP CREDIT AND MKT RISK	Memo Item PAYROLL DEDUCTION
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	
s	UBTOTAL of Receipts This Page (optional)		168.75
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
۹.	Full Name (Last, First, Middle Initial) EVA ROBERTSON Mailing Address 1322 ANGLEWOOD CIRCLE		Date of Receipt
	City BIRMINGHAM	State Zip Code AL 35216	08 15 2016 Transaction ID: B002857S000035L11A1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	Occupation VP, CORPORATE COMMUNICATIONS Aggregate Year-to-Date ▼ 672.00	42.00 Memo Item PAYROLL DEDUCTION
3.	Full Name (Last, First, Middle Initial) EVA ROBERTSON Mailing Address 1322 ANGLEWOOD CIRCLE City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify) Other (specify)	State Zip Code AL 35216 C Occupation VP, CORPORATE COMMUNICATIONS Aggregate Year-to-Date ▼ 672.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
D.	Full Name (Last, First, Middle Initial) JOHN SAWYER Mailing Address 2619 W LEGENDARY RUN City CINCINNATI FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code OH 45245 C Occupation SVP LIFE AND ANNUITY EXEC Aggregate Year-to-Date ▼ 2090.00	Date of Receipt 08
S	UBTOTAL of Receipts This Page (optional)		259.00
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
۹.	Full Name (Last, First, Middle Initial) JOHN SAWYER Mailing Address 2619 W LEGENDARY RUN City CINCINNATI FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	State Zip Code OH 45245 C Occupation SVP LIFE AND ANNUITY EXEC	Date of Receipt M M M 2016 Transaction ID: B002860S000036L11A1 Amount of Each Receipt this Period 175.00 Memo Item PAYROLL DEDUCTION
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2090.00	
	Full Name (Last, First, Middle Initial) BRIAN SCHUCH Mailing Address 351 MARHIL COURT City CRYSTAL LAKE FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify) County Street Middle Initial)	State Zip Code IL 60014 C Occupation SVP PROGRAM MANAGEMENT Aggregate Year-to-Date ▼ 333.44	Date of Receipt 08 15 2016 Transaction ID: B002857S000037L11A1 Amount of Each Receipt this Period 20.84 Memo Item PAYROLL DEDUCTION
C.	Full Name (Last, First, Middle Initial) BRIAN SCHUCH Mailing Address 351 MARHIL COURT City CRYSTAL LAKE FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify) Other (specify)	State Zip Code IL 60014 C Occupation SVP PROGRAM MANAGEMENT Aggregate Year-to-Date ▼ 333.44	Date of Receipt M M
S	SUBTOTAL of Receipts This Page (optional)	<u> </u>	216.68
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UI	ioi commerciai purposes, other than using the	name and address of any political committee to	solicit contributions from Such committee.
	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
Α.	Full Name (Last, First, Middle Initial) AARON SEURKAMP Mailing Address 8504 IVY TRAILS DRIVE City CINCINNATI FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary Other (specify)	State Zip Code OH 45244 C Occupation SVP CHIEF SALES OFFICER Aggregate Year-to-Date ▼ 640.00	Date of Receipt M M M
3.	Full Name (Last, First, Middle Initial) AARON SEURKAMP Mailing Address 8504 IVY TRAILS DRIVE City CINCINNATI FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code OH 45244 C Occupation SVP CHIEF SALES OFFICER Aggregate Year-to-Date ▼ 640.00	Date of Receipt M M M / D D / Y D Y D Y D Y D Y D Y D Y D Y D
C.	Full Name (Last, First, Middle Initial) MARY SIMMONS Mailing Address 135 CR 812 City HEFLIN FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code AL 36264 C Occupation VP ACTUARY Aggregate Year-to-Date ▼ 432.00	Date of Receipt 08 15 2016 Transaction ID: B002857S000039L11A1 Amount of Each Receipt this Period 27.00 Memo Item PAYROLL DEDUCTION
SI	UBTOTAL of Receipts This Page (optional)	>	107.00
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or for commercial purposes, other than using the	e name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	ATION FEDERAL PAC	
Full Name (Last, First, Middle Initial) MARY SIMMONS Mailing Address 135 CR 812		Date of Receipt
City HEFLIN FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code AL 36264 C Occupation VP ACTUARY Aggregate Year-to-Date ▼ 432.00	08 31 2016 Transaction ID: B002860S000039L11A1 Amount of Each Receipt this Period 27.00 Memo Item PAYROLL DEDUCTION
Full Name (Last, First, Middle Initial) FRANK SOTTOSANTI Mailing Address 2000 MAGNOLIA RIDGE	State 7:p Code	Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City BIRMINGHAM FEC ID number of contributing federal political committee.	State Zip Code AL 35243	Transaction ID: B002857S000041L11A1 Amount of Each Receipt this Period 105.00
Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify) ▼	Occupation SR VP & CHIEF MARKETING OFFICER Aggregate Year-to-Date ▼ 1680.00	Memo Item PAYROLL DEDUCTION
Full Name (Last, First, Middle Initial) FRANK SOTTOSANTI Mailing Address 2000 MAGNOLIA RIDGE City	State Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	Occupation SR VP & CHIEF MARKETING OFFICER Aggregate Year-to-Date ▼ 1680.00	Transaction ID: B002860S000041L11A1 Amount of Each Receipt this Period 105.00 Memo Item PAYROLL DEDUCTION
SUBTOTAL of Receipts This Page (optional)		237.00
TOTAL This Period (last page this line number	only)	

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<u> </u>		Tianic and address of any political committee to	Conor Contributions from Such Contribution.
	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
Α.	Full Name (Last, First, Middle Initial) BARRIE STOKES Mailing Address 2102 MARKCLIFF CIRCLE City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35216 C Occupation SVP SR ASSOCIATE COUNSEL Aggregate Year-to-Date ▼ 240.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3.	Full Name (Last, First, Middle Initial) BARRIE STOKES Mailing Address 2102 MARKCLIFF CIRCLE City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35216 C Occupation SVP SR ASSOCIATE COUNSEL Aggregate Year-to-Date ▼ 240.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
S	Full Name (Last, First, Middle Initial) WAYNE STUENKEL Mailing Address 2120 WOODLARK LANE City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code AL 35216 C Occupation SR VICE PRESIDENT, CHIEF ACTUARY Aggregate Year-to-Date ▼ 2785.52	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)	>	204.94
Т	OTAL This Period (last page this line number o	nly)	

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01 101 0011	innercial purposes, other than using the	name and address of any political committee to	Solicit contributions from Such committee.
	OF COMMITTEE (In Full) OTECTIVE LIFE CORPORA	TION FEDERAL PAC	
A. WAY Mailing City BIRMI FEC ID federal Name PROTE Receip	Primary General Other (specify) ▼	State Zip Code AL 35216 C Occupation SR VICE PRESIDENT, CHIEF ACTUARY Aggregate Year-to-Date ▼ 2785.52	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receip	D number of contributing I political committee. of Employer ECTIVE LIFE CORPORATION	State Zip Code AL 35094 C Occupation 2VP COMPLIANCE Aggregate Year-to-Date ▼	Date of Receipt 08 15 2016 Transaction ID: B002857S000044L11A1 Amount of Each Receipt this Period 25.00 Memo Item PAYROLL DEDUCTION
C. MIC Mailing City LEED: FEC II federal Name PROTE Receip	D number of contributing I political committee. of Employer ECTIVE LIFE CORPORATION	State Zip Code AL 35094 C Occupation 2VP COMPLIANCE Aggregate Year-to-Date ▼ 400.00	Date of Receipt M M M / D J J 2016 Transaction ID: B002860S000044L11A1 Amount of Each Receipt this Period 25.00 Memo Item PAYROLL DEDUCTION
SUBTOT	FAL of Receipts This Page (optional)	<u> </u>	224.94
TOTAL 7	This Period (last page this line number o	only)	

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or for commercial purposes, other than using the	te name and address of any political committee to	o solicit contributions from such confiffittee.
NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPOR	ATION FEDERAL PAC	
Full Name (Last, First, Middle Initial) CARL THIGPEN Mailing Address 2725 LOCKERBIE CIRCLE City MOUNTAIN BROOK FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35223 C Occupation EVP CHIEF INVESTMENT OFFICER Aggregate Year-to-Date ▼ 1280.00	Date of Receipt M
Full Name (Last, First, Middle Initial) CARL THIGPEN Mailing Address 2725 LOCKERBIE CIRCLE City MOUNTAIN BROOK FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35223 C Occupation EVP CHIEF INVESTMENT OFFICER Aggregate Year-to-Date ▼ 1280.00	Date of Receipt 08 31 2016 Transaction ID: B002860S000045L11A1 Amount of Each Receipt this Period 80.00 Memo Item PAYROLL DEDUCTION
Full Name (Last, First, Middle Initial) EDWARD THOMPSON Mailing Address 1407 SUTHERLAND PLACE City HOMEWOOD FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify) Other (specify)	State Zip Code AL 35209 C Occupation VICE PRESIDENT, IT Aggregate Year-to-Date ▼ 666.72	Date of Receipt 08 15 2016 Transaction ID: B002857S000046L11A1 Amount of Each Receipt this Period 41.67 Memo Item PAYROLL DEDUCTION
SUBTOTAL of Receipts This Page (optional)		201.67
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	ATION FEDERAL PAC	
Full Name (Last, First, Middle Initial) A. EDWARD THOMPSON Mailing Address 1407 SUTHERLAND PLACE	Date of Receipt	
City HOMEWOOD FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35209 C Occupation VICE PRESIDENT, IT Aggregate Year-to-Date ▼ 666.72	Transaction ID: B002860S000046L11A1 Amount of Each Receipt this Period 41.67 Memo Item PAYROLL DEDUCTION
Full Name (Last, First, Middle Initial) CATRINA TRIMM Mailing Address 6321 WILDWOOD VALLEY D City BRENTWOOD FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code TN 37027 C Occupation DIR I PROJECTS AND SYSTEMS Aggregate Year-to-Date 400.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) CATRINA TRIMM Mailing Address 6321 WILDWOOD VALLEY D City BRENTWOOD FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code TN 37027 C Occupation DIR I PROJECTS AND SYSTEMS Aggregate Year-to-Date ▼ 400.00	Date of Receipt 08 31 2016 Transaction ID: B002860S000047L11A1 Amount of Each Receipt this Period 25.00 Memo Item PAYROLL DEDUCTION
SUBTOTAL of Receipts This Page (optional)		91.67
TOTAL This Period (last page this line number	only)	

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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
۹.	Full Name (Last, First, Middle Initial) GEORGE VOGEL Mailing Address 330 W 4TH STREET, #17 City CINCINNATI FEC ID number of contributing federal political committee.	State Zip Code OH 45202	Date of Receipt M M M / D D / Y 2016 Transaction ID: B002857S000048L11A1 Amount of Each Receipt this Period 25.00 Memo Item
	Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify) ▼	Occupation HYBRID WHOLESALER Aggregate Year-to-Date ▼ 400.00	PAYROLL DEDUCTION
	Full Name (Last, First, Middle Initial) GEORGE VOGEL Mailing Address 330 W 4TH STREET, #17 City CINCINNATI FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify) Other	State Zip Code OH 45202 C Occupation HYBRID WHOLESALER Aggregate Year-to-Date ▼ 400.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C .	Full Name (Last, First, Middle Initial) MATTHEW VOVK Mailing Address 9853 JANE COURT City CINCINNATI FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify)	State Zip Code OH 45241 C Occupation AVP PRODUCT MARKETING Aggregate Year-to-Date ▼ 400.00	Date of Receipt M M M
S	UBTOTAL of Receipts This Page (optional)	<u> </u>	75.00
Т	OTAL This Period (last page this line number of	nly)	

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	the name and address of any political committee	
NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPO	RATION FEDERAL PAC	
Full Name (Last, First, Middle Initial) MATTHEW VOVK Mailing Address 9853 JANE COURT		Date of Receipt
		08 31 2016
CINCINNATI	State Zip Code OH 45241	Transaction ID : B002860S000049L11A
FEC ID number of contributing federal political committee.	C 45241	Amount of Each Receipt this Period 25.00
Name of Employer PROTECTIVE LIFE INSURANCE COMPAN	Occupation AVP PRODUCT MARKETING	Memo Item PAYROLL DEDUCTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) STEVEN WALKER		Date of Receipt
Mailing Address 1517 HIGHLAND LAKES	TRAIL	08 15 _2016 _
City BIRMINGHAM	State Zip Code AL 35242	08 15 2016 Transaction ID : B002857S000050L11A Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer PROTECTIVE LIFE CORPORATION	Occupation EXECUTIVE VP, CFO & CONTROLLER	PAYROLL DEDUCTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3223.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 1517 HIGHLAND LAKES	TRAIL	08 31 2016
City BIRMINGHAM	State Zip Code AL 35242	Transaction ID : B002860S000050L11A Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	223.00
Name of Employer PROTECTIVE LIFE CORPORATION	Occupation EXECUTIVE VP, CFO & CONTROLLER	Memo Item PAYROLL DEDUCTION
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3223.00	
SUBTOTAL of Receipts This Page (optional)	448.00
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TOTAL This Period (last page this line numb	per only)	

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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
۱.	Full Name (Last, First, Middle Initial) MATTHEW WEBER Mailing Address 5800 VALLEY PARK DRIVE	Date of Receipt	
	City	State Zip Code	08 15 2016 Transaction ID : B002857S000051L11A1
	FEC ID number of contributing federal political committee.	KY 40299	Amount of Each Receipt this Period 26.20
	Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For:	Occupation DIVISIONAL SALES MANAGER	Memo Item PAYROLL DEDUCTION
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 419.20	
3.	Full Name (Last, First, Middle Initial) MATTHEW WEBER Mailing Address 5800 VALLEY PARK DRIVE		Date of Receipt
	City LOUISVILLE	State Zip Code KY 40299	08 31 2016 Transaction ID: B002860S000051L11A1 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.20
	Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For:	Occupation DIVISIONAL SALES MANAGER	PAYROLL DEDUCTION
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 419.20	
) .	Full Name (Last, First, Middle Initial) PAUL WELLS		Date of Receipt
	Mailing Address 2550 GENOA WAY, APT 211 City	State Zip Code	08 15 2016 Transaction ID : B002857S000052L11A1
	BIRMINGHAM	AL 35243	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	24.70 Memo Item
	Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For:	Occupation SVP AND CFO LAD	PAYROLL DEDUCTION
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 395.20	
S	UBTOTAL of Receipts This Page (optional)		77.10
T	OTAL This Period (last page this line number of	nly)	

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UI	Tor commercial purposes, other than using the	name and address of any political committee to	Solicit Contributions from Such Confiffittee.
\rangle	NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORA	TION FEDERAL PAC	
	Full Name (Last, First, Middle Initial) PAUL WELLS Mailing Address 2550 GENOA WAY, APT 211 City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Receipt For: Primary General Other (specify) Other (specify)	State Zip Code AL 35243 C Occupation SVP AND CFO LAD Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Full Name (Last, First, Middle Initial) CHARLES WINDHAM Mailing Address 312 RICHMAR DRIVE City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35213 C Occupation VP INVESTMENTS Aggregate Year-to-Date ▼ 284.24	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Full Name (Last, First, Middle Initial) CHARLES WINDHAM Mailing Address 312 RICHMAR DRIVE City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer PROTECTIVE LIFE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35213 C Occupation VP INVESTMENTS Aggregate Year-to-Date ▼ 284.24	Date of Receipt M M M / 2016 Transaction ID: B002860S000053L11A1 Amount of Each Receipt this Period 17.89 Memo Item PAYROLL DEDUCTION
s	UBTOTAL of Receipts This Page (optional)	•	60.48
T	OTAL This Period (last page this line number of	only)	4785.22

ITEMIZED DISBURSEMENTS	Line concrete cohodule(s)			
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) PROTECTIVE LIFE CORPORATIO Full Name (Last, First, Middle Initial)	e and address of any political	I by any perso committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
A. TIM SCOTT FOR SENATE Mailing Address 1405 ASHLEY RIVER ROAD			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
CHARLESTON Purpose of Disbursement FUNDRAISER Candidate Name TIMOTHY E SCOTT Office Sought: House Disbursem	tate Zip Code SC 29407 ent For: 2016 Primary General Other (specify)	011 Category/ Type	Transaction ID: B002859S000001L23 Amount of Each Disbursement this Period 2500.00 Memo Item	
Full Name (Last, First, Middle Initial) B. Mailing Address			Date of Disbursement	
Purpose of Disbursement Candidate Name Office Sought: House Disbursem Senate F		Category/ Type	Amount of Each Disbursement this Period Memo Item	
Full Name (Last, First, Middle Initial) C. Mailing Address	toto Zin Codo		Date of Disbursement	
Purpose of Disbursement Candidate Name Office Sought: House Disbursem Senate President		Category/ Type	Amount of Each Disbursement this Period Memo Item	
State: District: SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			2500.00 2500.00	